



U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only				
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.				
E				
1. File Number U - 1.2376	2. Fiscal Year Covered From:			
	61/51/04 Through: 12/31/04			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Michael G Murphy	Name Vew york city District council of corporte			
,	Labor Organization File Number 032922			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street SETROY AUC	Street 395 HUUSONSH			
City Long Beach	city New York			
State New York ZIP Code + 4 1156	State New York ZIP Code + 4 10019			
5. Position in labor organization. UNION Represent	na tive			
Enter appropriate data below if, during the past "Iscal year, you or your spouse or minor child directly or Indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of				
monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name	look A- A+ A+ Ached PAPER work			
Trade Name, if any:	2Nd PASS			
P.O. Box, Bldg., Room No., if any	AII			
	7.b. Amount.			
Street				
City				
State ZIP Code + 4 [
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report/(including the information/contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed / My/	On 610 05 212 366-7500 Date Telephone Number			

Labor Management Conference 2/11/04 to 2/19/04 \$3,406.59

Air Far	e	\$395.00
Registra	ation	\$695.00
Manero's Steak House 2/12/04		\$50.06
Pier 5	2/17/04	\$64.73
Pier 5	2/19/04	\$97.64
Labor Management Golf Outing 2/18/04		\$114.30

Dinner/Wall/Ceiling Dinners Florida

Association of Wall, Ceiling and Carpentry INC. 125 Jericho Turnpike, Suite 301 Jericho, NY 11753

<u>Date</u>	<u>Amount</u>	<u>Place</u>
2/20/04	\$172.00	Nikki Club, FL- lunch
2/24/04	\$125.00	Penrods, FL- lunch
2/25/04	\$100.00	Joe's, FL- dinner

Wall-Ceiling Conference Las Vegas

4/10/04	\$110.00	Bradley Ogden, NV-dinner
4/12/04	\$150.00	Palm, NV- dinner
4/13/04	\$100.00	Terizzi, NV- lunch
4/13/04	\$150.00	Terizzi, NV- dinner
4/16/04	\$75.00	Empress Ct.,
		NV- dinner

Sponsorship of Hard Hat Fisher Trip during Building Trades conference in Fl 2/2/04 \$130,50

Lunch with Mackay Shields rep Denise Spillane on 5/25/04 \$125.00

Mackay Shields LLC 9 W. 57th St., 33rd Floor New York, NY 10019

TOTAL \$6,060.82 Sincerely yours,

Mike Murphy